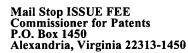
## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail



(703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

maintenance fee notification	1S		specifying	a new correspondence address		
CURRENT CORRESPONDENC	CE ADDRESS (Note: Use Block 1 for	any change of address)		Note: A certificate o Fee(s) Transmittal. T	f mailing can only be used f his certificate cannot be used	or domestic mailings of the for any other accompanying
23911 75				papers. Each addition	al paper, such as an assignmente of mailing or transmission.	ent or formal drawing, must
CROWELL & M		OIP	A		rtificate of Mailing or Tran	emission
INTELLECTUAL P.O. BOX 14300	PROPERTY GROUP	ANTE 192	, y <sub>C98</sub>	I hereby certify that it States Postal Service addressed to the Ma transmitted to the US	his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (703) 746-4000, on the	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.
V/20/2005 ABEYENEZ 0000	11737 106335790	百 , 35	005 ]			. (Depositor's name)
FP-4EA4	1400.00 GP	E	ig T			(Signature)
FC:1501 PFC:1504 FC:8001	300.00 OP 15.00 OP	BADEMAR	KOK			(Date)
APPLICATION NO.	FILING DATE	I	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/633,579	10/633,579 08/05/2003		Matthias	s Gerlach	029310.51098D1	5435
TITLE OF INVENTION: B	ie resie imiorizo-3-12-	AMME BERITA	III V LO			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	07/19/2005
EXAM	EXAMINER		Т	CLASS-SUBCLASS		
DAVIS, ZINNA NORTHINGTON		1625		514-383000		
CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND	ation form e of a Customer	or agents OR, alternatively (2) the name of a single fi registered attorney or agen		le firm (having as a member a agent) and the names of up to orneys or agents. If no name is printed.		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion			pear on the patent. If an assig for filing an assignment.		locument has been filed for
(A) NAME OF ASSIGNEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)		e ele		
Gruenenthal	Aachen, Germany					
Please check the appropriate	assignee category or catego			oatent): 🗖 Individual 🥸 🔾	orporation or other private gr	oup entity Government
	4a. The following fee(s) are enclosed:			4b. Payment of Fee(s):		
Issue Fee		A check in the amount of the fe		` '		
Publication Fee (No small entity discount permitted Advance Order - # of Copies 5		d) Payment by credit card. Form PTO-20 The Director is hereby authorized by			124	
Advance Order - # of	Copies	<del></del>	Deposit Acc	count Number $05-1323$	enarge the required fee(s), or enclose an extra c	opy of this form).
5. Change in Entity Status  a. Applicant claims SI	(from status indicated above MALL ENTITY status. See	,	ab. Applic	cant is no longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) v ords of the Onied States Pate	ue Fee and Publicati vill not be accepted ent and Trademark (	on Fee (if ar from anyone Office.	ny) or to re-apply any previous e other than the applicant; a reg		ation identified above. he assignee or other party in
Authorized Signature	100			Date	Tuly 19, 2005 26,269	<u></u>
Typed or printed name	J.D. Evans			Registration	1 No26,269	<del></del> -
submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	plication form to the USPT for reducing this burden, shinia 22313-1450. DO NOT 11450.	O. Time will vary on the sent to the SEND FEES OR C	depending up Chief Infort OMPLETEI	to obtain or retain a benefit by llection is estimated to take 12 pon the individual case. Any continuous officer, U.S. Patent and D FORMS TO THIS ADDRES lection of information unless it	omments on the amount of the Trademark Office, U.S. Dep S. SEND TO: Commissioner	me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,